

## PATENT APPLICATION DATA ENTRY FORMAT

### **Inventor Information**

Inventor One Given Name: Thomas  
Middle Initial: E.  
Family Name: CROSS  
Name Suffix: Jr.  
Postal Address Line One: 23810 Nightingale Street  
Postal Address Line Two:  
City: St. Francis  
State or Province: MN  
Postal or Zip Code: 55070  
Country of Citizenship: United States of America

Inventor Two Given Name:  
Middle Initial:  
Family Name:  
Name Suffix:  
Postal Address Line One:  
Postal Address Line Two:  
City:  
State or Province:  
Postal or Zip Code:  
Country of Citizenship:

### **Correspondence Information**

Correspondence Customer Number: 27581  
Electronic Mail: steve.bauer@medtronic.com

### **Application Information**

Title Line One: Paddle-Style Medical Lead and Method  
Title Line Two:  
Title Line Three:  
Total Drawing Sheets: 18  
Formal Drawings?: ☒ Yes ☐ No  
Application Type: Utility  
Attorney Docket Number: P-10991.00US

### **Representation Information**

Representative Customer Number: 27581

**Continuity Information**

This application is a: utility application claiming priority from  
>>Application One: 60/420,570  
Filing Date: October 23, 2002  
Patent Number: na  
Which is a: provisional application and  
>>Application Two: 60/508,107  
Filing Date: October 2, 2003  
Patent Number: na  
Which is a: provisional application  
>> Application Three:  
Filing Date:  
Patent Number:

**Prior Foreign Applications**

Foreign Application One:  
Filing Date:  
Country:  
Priority Claimed?: ☐ Yes ☐ No

**Assignee Information for Inclusion on the Patent Application Publication**

Assignee: Medtronic, Inc.  
Address: Minneapolis, Minnesota

## PATENT APPLICATION DATA ENTRY FORMAT

### **Inventor Information**

Inventor One Given Name: Thomas  
Middle Initial: E.  
Family Name: Cross  
Name Suffix: Jr.  
Postal Address Line One: 23810 Nightingale Street  
Postal Address Line Two:  
City: St. Francis  
State or Province: MN  
Postal or Zip Code: 55070  
Country of Citizenship: United States of America

Inventor Two Given Name:  
Middle Initial:  
Family Name:  
Name Suffix:  
Postal Address Line One:  
Postal Address Line Two:  
City:  
State or Province:  
Postal or Zip Code:  
Country of Citizenship:  
Inventor Three Given Name:  
Middle Initial:  
Family Name:  
Name Suffix:  
Postal Address Line One:  
Postal Address Line Two:  
City:  
State or Province:  
Postal or Zip Code:  
Country of Citizenship:

### **Correspondence Information**

Correspondence Customer Number: 27581  
Electronic Mail: steven.bauer@medtronic.com

### **Application Information**

Title Line One: PADDLE-STYLE MEDICAL LEAD AND METHOD  
Title Line Two:  
Title Line Three:

Total Drawing Sheets:  
Formal Drawings?: ☒ ☐ No  
Application Type: Utility  
Attorney Docket Number: P-10991.01US

**Representation Information**

Representative Customer Number: 27581

**Continuity Information**

This application is a: utility application claiming priority from  
>>Application One: 60/420,580  
Filing Date: October 23, 2002  
Patent Number: NA  
Which is a: provisional application and  
>>Application Two: 60/508,107  
Filing Date: October 2, 2003  
Patent Number: NA  
Which is a: provisional application  
>> Application Three:  
Filing Date:  
Patent Number:

**Prior Foreign Applications**

Foreign Application One:  
Filing Date:  
Country:  
Priority Claimed?: ☐ Yes ☐ No

**Assignee Information for Inclusion on the Patent Application Publication**

Assignee: Medtronic, Inc.  
Address: Minneapolis, Minnesota